## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10693167

| CLAIMS AS FILED - PART I   |                     |  |                 |                               |              |                  |            | SMALL ENTITY TYPE  |                        |          | OTHER THAN OR SMALL ENTITY |                        |  |
|--|---------------------|--|-----------------|-------------------------------|--------------|------------------|------------|--------------------|------------------------|----------|----------------------------|------------------------|--|
| r  |                     |  | (Column 1)      |                               | (Column 2)   |                  |            |                    |                        | OR       |                            |                        |  |
| TOTAL CLAIMS   |                     |  | 8               |                               |              |                  |            | RATE               | FEE                    |          | RATE                       | FEE                    |  |
| FOR  |                     |  | NUMBER FILED    |                               | NUMB         | ER EXTRA         | E          | BASIC FEE          | 385.00                 | OR       | BASIC FEE                  | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |                     |  | Ø minus 20=     |                               | *            |                  |            | X\$ 9=             |                        | OR       | X\$18=                     |                        |  |
| INDEPENDENT CLAIMS   |                     |  |                 | าบร 3 =                       |              |                  | L          | X43=               |                        | OR       | X86=                       |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |                     |  |                 |                               |              |                  | ١          | +145=              |                        | OR       | +290=                      |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |                     |  |                 |                               |              |                  | _          | TOTAL              |                        | OR       | TOTAL                      |                        |  |
| CLAIMS AS AMENDED - PART II  |                     |  |                 |                               |              |                  |            |                    |                        |          | OTHER                      | THAN                   |  |
|  | •                   | (Column 1)   | (Column 2)      |                               |              | (Column 3)       |            | SMALL              | ENTITY                 | OR       | SMALL                      | ENTITY                 |  |
| NT A   |                     | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                        |                 | HIGH<br>NUM<br>PREVIC<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
| <b>AMENDMENT</b>   | Total               | *  | Minus           | **                            |              | E                | L          | X\$ 9=             |                        | QR       | X\$18=                     |                        |  |
|  | Independent         | *  | Minus           | ***                           | - CI 4114    | =                |            | X43=               |                        | OR       | X86=                       |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |                     |  |                 |                               |              |                  |            | +145=              |                        | OR       | +290=                      |                        |  |
| TOTAL<br>ADDIT. FEE  |                     |  |                 |                               |              |                  |            |                    |                        | OR       | TOTAL<br>ADDIT, FEE        |                        |  |
| (Column 1) (Column 2) (Column 3)   |                     |  |                 |                               |              |                  |            |                    |                        |          |                            |                        |  |
|  |                     | CLAIMS   |                 | HIGH                          | EST          |                  | Г          |                    | ADDI-                  |          |                            | ADDI-                  |  |
| NT B   |                     | REMAINING<br>AFTER<br>AMENDMENT                                  |                 | PREVIO<br>PAID                | DUSLY        | PRESENT<br>EXTRA |            | RATE               | TIONAL<br>FEE          |          | RATE                       | TIONAL<br>FEE          |  |
| AMENDMENT  | Total               | *  | Minus           | drik                          |              | =                |            | X\$ 9=             |                        | OR       | X\$18=                     |                        |  |
| ME   | Independent         | *  | Minus           | ***                           |              | =                |            | X43=               |                        | OR       | X86=                       |                        |  |
| ٩  | FIRST PRESE         | NTATION OF MU  | JLTIPLE DEP     | ENDENT                        | CLAIM        | <u></u>          |            | +145=              |                        | OR       | +290=                      |                        |  |
|  |                     |  |                 |                               |              |                  |            | TOTAL<br>ODIT. FEE |                        | OR       | TOTAL<br>ADDIT. FEE        |                        |  |
|  |                     | (Column 1)   |                 | (Colur                        | nn 2)        | (Column 3)       | ı <u>-</u> |                    |                        | _        |                            |                        |  |
| AMENDMENT C  |                     | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                        | ·               | HIGH<br>NUM<br>PREVIC<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |            | RATE               | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total               | *  | Minus           | **                            |              | <b>.</b>         |            | X\$ 9=             |                        | OR       | X\$18=                     |                        |  |
|  | Independent         | *  | Minus           | ***                           |              | *                |            | X43=               |                        | OR       | X86≃                       |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |                     |  |                 |                               |              |                  |            | +145=              |                        | OR       | +290=                      |                        |  |
| A William A Line And the Address to Address 2 write TV in Column 3       |                     |  |                 |                               |              |                  |            |                    |                        | <u> </u> | TOTAL<br>ADDIT. FEE        |                        |  |
|  | el sha "Lilahast bl | mber Previously Pa<br>mber Previously Pai<br>mber Previously Pai | sid Ear IN THIS | S SPACE I                     | e loce tha   | n 3. enter "3."  |            | _                  | ropriate box           |          |                            |                        |  |